



U.S. Department of Justice

*United States Attorney
Southern District of New York*

*The Silvio J. Mollo Building
One Saint Andrew's Plaza
New York, New York 10007*

December 18, 2019

BY ECF

The Honorable J. Paul Oetken
United States District Judge
Southern District of New York
Thurgood Marshall U.S. Courthouse
40 Foley Square
New York, New York 10007

Re: United States v. Parnas, et al., 19 Cr. 725 (JPO)

Dear Judge Oetken:

The Government respectfully writes to enclose copies of the exhibits submitted by the Government at the December 17, 2019 bail modification hearing, which have been redacted for personal identifying information with the Court's permission.

Respectfully submitted,

GEOFFREY S. BERMAN
United States Attorney for the
Southern District of New York

By: _____/s/_____
Rebekah Donaleski
Nicolas Roos
Douglas Zolkind
Assistant United States Attorneys
(212) 637-2423/2421/2418

cc: Defense Counsel (by ECF)

From: ebmjr@macmahon-law.com
To: [Donaleski, Rebekah \(USANYS\)](#)
Cc: ["Joshua Dratel"](#)
Subject: Bank Statements - For Bail Purposes Only
Date: Thursday, October 17, 2019 5:27:30 PM
Attachments: [image001.jpg](#)
[Suntrust.png](#)
[Suntrust Student.png](#)
[Chase.png](#)

Rebekah – here are the bank statements that I am told constitute the current cash accounts possessed by the Parnas’.

I am also told that approximately \$30,000 in cash was seized as part of the search of the residence in Florida which should be returned.

My proposal would be to have the Parnas’ place \$200,000 in cash, in immediately available funds, with the clerk in the EDVA as part of a revised bond package that would include the no contact provisions and monitoring already ordered. Mr. and Mrs. Parnas and their son Aaron would also execute an undertaking for any additional \$800,000 that, like the cash portion, would be due and owing if Mr. Parnas failed to appear for any hearing for which he was not lawfully excused up to and including the trial and its incidences.

I offer the \$200,000 as Mrs. Parnas is raising three young children in Florida and the family will need cash to live on as well as pay the travel and legal expense occasioned by this case.

If we can reach an agreement we can present an agreed order to Judge Nachmanoff and get Mr. Parnas to pretrial services to arrange the monitoring and get to NY next Wednesday for the arraignment.

I hope this is acceptable.

Ed

Edward B. MacMahon, Jr.
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From: ebmjr macmahon-law.com <ebmjr@macmahon-law.com>
Sent: Thursday, October 17, 2019 9:06 PM
To: Donaleski, Rebekah (USANYS)
Subject: Re: Bank Statements - For Bail Purposes Only

What is ur number?
Not sure how I can get this affidavit done fully from jail
Ed

Sent from iPhone
Edward MacMahon

On Oct 17, 2019, at 8:45 PM, Donaleski, Rebekah (USANYS) <Rebekah.Donaleski@usdoj.gov> wrote:

Ed,

We have run this proposal up our chain, and are still concerned about the lack of assets to secure the bond. We would be willing to consent to the following modification:

1. Provide 2 months of bank records for Svetlana Parnas's account at SunTrust account prior to release.
2. Complete a financial affidavit (attached) confirming what you represented to us, that there are no additional assets (cash or property) to secure the bond prior to release. He could supplement with attachments as needed within 1 week of release.
3. \$1 million bond secured by \$200k in cash posted before release.
4. Co-signed by Svetlana and Aaron Parnas prior to release; 3 additional co-signers (not related to a co-defendant) within 1 week of release.
5. GPS monitoring in place prior to release.
6. Home detention with GPS; can leave for medical, legal
7. Travel restricted to SDNY and SDFL
8. Surrender passports and no new applications
9. No contact with co-defendants outside the presence of counsel.

If this is acceptable, we would consent to the modification of his bond to allow for his release as soon as he meets conditions #1-5 (which conceivably could be as early as tomorrow or Monday). Please let us know- we're available to discuss by phone tonight. We know you want to get this done as soon as possible.

From: ebmjr macmahon-law.com <ebmjr@macmahon-law.com>
Sent: Thursday, October 17, 2019 5:26 PM
To: Donaleski, Rebekah (USANYS) <RDonaleski@usa.doj.gov>
Cc: 'Joshua Dratel' <JDratel@joshuadratel.com>
Subject: Bank Statements - For Bail Purposes Only

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<image001.jpg>

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<Financial Affidavit.docx>



U.S. Department of Justice
U.S. Marshals Service

Asset Forfeiture Division
Financial Statement of Debtor
(Submitted for Government Action on Claims Due the United States)

FINANCIAL STATEMENT OF DEBTOR

Authority for the solicitation of the requested information is one or more of the following: 5 U.S.C. 301, 901 (see Note, Executive Order 6166, June 10, 1933); 28 U.S.C. 501, *et seq.*; 31 U.S.C. 951, *et seq.*; 44 U.S.C. 3101; 4 CFR 101, *et seq.*; 28 CFR 0.160, 0.171 and Appendix to Subpart Y, Fed.R.Civ.P. 33(a), 28 U.S.C. 1651, 3201 *et seq.*
The principal purpose for gathering this information is to evaluate your ability to pay the Government's claim or judgment against you. Routine uses of the information are established in the following U.S. Department of Justice Case File Systems published in Vol. 42 of the Federal Register; Justice/CIV-001 at page 5332; Justice/TAX-001 at page 15347; Justice/USA-005 at pages 53406-53407; Justice/USA-007 at pages 53408-53410; Justice/CRIM-016 at page 12274. Disclosure of the information is voluntary. If the requested information is not furnished, the U.S. Department of Justice has the right to such disclosure of the information by legal methods.

SECTION 1: PERSONAL INFORMATION

1. Full Name(s) Lev Parnas
2. Street Address [REDACTED]
City Boca Raton State Florida Zip [REDACTED]
County of Residence Palm Beach County
Own ☒ Rent ☐ Other _____
3. Home Telephone: None
Best time to call _____ a.m. _____ p.m.
- 3a. Cellular Number: [REDACTED]
4. Marital Status: ☐ Married ☐ Separated
☐ Unmarried (single, divorced, widowed)
5. Spouse's Name: Svetlana Parnas
6. Your Social Security No. (SSN) _____
- 6a. Spouse's Social Security No. [REDACTED]
- 6b. Spouse's Date of Birth: [REDACTED]
7. List the dependents you can claim on your tax return: (Attach sheet if more space is needed)
- | First Name | Relationship | Age | Does this person live with you? | First Name | Relationship | Age | Does this person live with you? |
|-------------------|--------------|-----|---|------------|--------------|-----|--|
| <u>[REDACTED]</u> | | | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| <u>[REDACTED]</u> | | | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| | | | <input type="checkbox"/> No <input type="checkbox"/> Yes | | | | <input type="checkbox"/> No <input type="checkbox"/> Yes |

SECTION 2: YOUR BUSINESS INFORMATION

8. Are you or your spouse self-employed, or do you or your spouse operate a business?
(Check "Yes" if either applies) ☐ No ☒ Yes If yes, provide the following information:
- 8a. Name of Business Global Energy Producers
- 8b. Street Address _____
City _____ State _____ Zip _____
- 8c. Employer Identification No.: _____
- 8d. Do you have employees? ☐ No ☐ Yes
- 8e. Do you have accounts receivable? ☐ No ☐ Yes
If yes, please complete Section 8 on page 5.
- ATTACHMENTS REQUIRED:** Please provide proof of self-employment income for the prior 3 months (e.g., invoices, commissions, sales records, income statement).

SECTION 3: EMPLOYMENT INFORMATION

9. Your employer _____
Street Address _____
City _____ State _____ Zip _____
Work telephone no. (_____) _____
May we contact you at work? ☐ No ☐ Yes
How long with this employer? _____
Occupation _____
- 9a. Spouse's Employer _____
Street Address _____
City _____ State _____ Zip _____
Work telephone no. (_____) _____
May we contact you at work? ☐ No ☐ Yes
How long with this employer? _____
Occupation _____



ATTACHMENTS REQUIRED: Please provide proof of gross earnings and deductions for the past 3 months from each employer (e.g. pay stubs, earnings statements). If year-to-date information is available, send only 1 such statement as long as a minimum of 3 months is represented.

SECTION 4: OTHER INCOME INFORMATION

10. Do you receive income from sources other than your own business or your employer? (Check all that apply.)

Pension ___ Social Security ___ Federal Benefits ___ Other (specify, e.g., child support, alimony, rental) _____



ATTACHMENTS REQUIRED: Please provide proof of pension/social security/other income for the past 3 months from each payor, including any statements showing deductions. If year-to-date information is available, send only 1 statement as long as 3 months are represented.

SECTION 5: BANKING, INVESTMENT, CASH, CREDIT, AND LIFE INSURANCE INFORMATION

11. **Checking Accounts.** List all checking accounts. (If you need additional space, attach a separate sheet.)

Account Type	Bank, Credit Union, or Institution	Bank Account No.	Current Balance
11a. Checking	Name <u>LSDAMA LLC</u> Address _____ City/State/Zip <u>Boca Raton, FL</u>	_____	\$ <u>644.37</u>
11b. Checking	Name _____ Address _____ City/State/Zip _____	_____	\$ _____
11c. Total Checking Accounts Balances			\$ _____

12. **Other Accounts.** List all accounts, including brokerage, savings, IRAs, and money market, not listed in 11.

Account Type	Bank, Credit Union, or Institution	Bank Account No.	Current Balance
12a. _____	Name _____ Address _____ City/State/Zip _____	_____	\$ _____
12b. _____	Name _____ Address _____ City/State/Zip _____	_____	\$ _____
12c. _____	Name _____ Address _____ City/State/Zip _____	_____	\$ _____
12d. Total Other Accounts Balances			\$ _____



ATTACHMENTS REQUIRED: Please include your current bank statements (checking, savings, money market, and brokerage accounts) for the past 3 months for all accounts.

13. **Investments.** List all investment assets below. Include stocks, bonds, mutual funds, stock options, certificates of deposits, and retirement assets such as IRAs, Keogh, and 401(k) plans.

Name of Company	No. of Shares/Units	Current Value	Loan Amount (if any)	Used as collateral on a loan?	
13a. _____	_____	\$ _____	\$ _____	___ No	___ Yes
13b. _____	_____	\$ _____	\$ _____	___ No	___ Yes
13c. _____	_____	\$ _____	\$ _____	___ No	___ Yes
13d. Total Investments \$	_____				

14. **Cash on Hand.** Include any money that you have that is not in the bank.

14a. Total Cash on Hand \$5000.00

15. **Available Credit.** List all lines of credit, including credit cards. (If you need additional space, attach a separate sheet.)

Full Name of Credit Institution	Credit Limit	Amount Owed	Minimum Payment
15a. Name <u>Lev Parnas (Capital One)</u>	<u>\$300.00</u>	<u>\$18.53</u>	<u>\$18.53</u>
Address <u>[REDACTED]</u>			
City/State/Zip <u>Boca Raton, FL [REDACTED]</u>			
15b. Name <u>Lev Parnas (Discover CC)</u>	<u>\$500.00</u>	<u>\$164.11</u>	<u>\$35.00</u>
Address <u>[REDACTED]</u>			
City/State/Zip <u>Boca Raton, FL [REDACTED]</u>			

15c. Total Minimum Payments \$53.53

16. **Life Insurance.** Do you have life insurance with a cash value? ☒ No ☐ Yes
(Term life insurance does not have a cash value.)

16a. Name of Insurance Company _____

16b. Policy Number(s) _____

16c. Owner of Policy _____

16d. Current Cash Value \$ _____ 16e. Outstanding Loan Balance \$ _____

16f. Subtract "Outstanding Loan Balance" (Line 16e) from "Current Cash Value" (Line 16d) = \$ _____



ATTACHMENTS REQUIRED: Please include a statement from the life insurance companies that includes type and cash/loan value amounts. If currently borrowed against, include loan amount and date of loan.

SECTION 6: OTHER INFORMATION

17. Respond to the following questions related to your financial condition: (Attach a separate sheet if you need more space.)

17a. Do you have a safe deposit box? ☒ No ☐ Yes

If yes, please include the name and address of location of box, the box number, and the contents below:

17b. Do you have a will? ☒ No ☐ Yes; if yes, where is it kept? _____

17c. Are there any garnishments against your wages? ☒ No ☐ Yes

If yes, who is the creditor? _____ Date of Judgment _____ Amount of debt \$ _____

17d. Are there any judgments against you? ☐ No ☒ Yes

If yes, who is the creditor? _____ Date of Judgment _____ Amount of debt \$ _____

17e. Are you a party to a lawsuit? ☐ No ☒ Yes

If yes, amount of the suit \$ _____ Possible completion date _____ Court _____

Subject matter of the suit _____

17f. Did you ever file bankruptcy? ☒ No ☐ Yes

If yes, date filed _____ Date discharged _____

17g. In the past 10 years did you transfer any assets out of your name for less than their actual value? ☒ No ☐ Yes

If yes, what asset? _____ Value of asset at time of transfer \$ _____

When was it transferred? _____ To whom was it transferred? _____

17h. Do you anticipate any increase in household income in the next two years? ☒ No ☐ Yes

If yes, why will the income increase? _____ (Attach sheet if you need more space.)

How much will it increase? _____

17i. Are you the beneficiary of a trust or an estate? ☒ No ☐ Yes

If yes, name of the trust or estate _____ Anticipated amount to be received \$ _____

When will the amount be received? _____

17j. Are you a participant in a profit sharing plan? ☒ No ☐ Yes
 If yes, name of plan _____ Value in plan \$ _____

SECTION 7: ASSETS AND LIABILITIES


18. **Purchased Automobiles, Trucks, and Other Licensed Assets.** Include boats, RVs, motorcycles, trailers, etc. (If you need additional space, attach a separate sheet.)

Description (year, make, model)	Current Value*	Current Loan Balance	Name of Lender	Purchase Date	Monthly Payment
18a. 2015 Kia Forte	\$ appx 6,000	\$0.00	N/A	07/2017	\$N/A
18b. 2011 Mercedes S550	\$ appx 15,000	\$0.00	N/A	06/2017	\$N/A

* Current Value is the amount you could sell the asset for today.

19. **Leased Automobiles, Trucks, and Other Licensed Assets.** Included boats, RVs, motorcycles, trailers, etc. (If you need additional space, attach a separate sheet.)

Description (year, make, model)	Lease Balance	Name and Address of Lessor	Lease Date	Monthly Payment
19a. None	\$ _____	_____	_____	\$ _____
19b. _____	\$ _____	_____	_____	\$ _____

 **ATTACHMENTS REQUIRED:** Please include your current statement from lender with monthly car payment and current balance of the loan for each vehicle purchased or leased. Also include a copy of your drivers license and your spouse's.

20. **Real Estate.** List all real estate you own. (If you need additional space, attach a separate sheet.)

Street Address, City, State, Zip, County, Lender/Lien Holder	Date Purchased	Purchase Price	Current Value	Loan Balance	Monthly Payment
20a. None	_____	\$ _____	\$ _____	\$ _____	\$ _____
20b. _____	_____	\$ _____	\$ _____	\$ _____	\$ _____

21. **Personal Assets.** List all personal assets below. (If you need additional space, attach a separate sheet.)

Furniture/Personal Effects includes the total current market value of your household items such as furniture and appliances.
Other Personal Assets includes all artwork, jewelry, collections, antiques, or other assets.

Description	Current Value	Loan Balance	Lender	Monthly Payment	Date of Final Payment
21a. Furniture/Personal Effects	\$2,000.00	\$0.00	N/A	\$ N/A	_____
Other: (List below)					
21b. Artwork	\$0.00	\$ _____	_____	\$ _____	_____
21c. Jewelry	\$30,000.00	\$0.00	N/A	\$ N/A	_____
21d. _____	\$ _____	\$ _____	_____	\$ _____	_____

21e. _____ \$ _____ \$ _____ \$ _____

22. **Business Assets.** List all business assets and encumbrances below; include Uniform Commercial Code filings. (If you need additional space, attach a separate sheet.) *Tools Used in Trade or Business* includes the basic tools or books used to conduct your business, excluding automobiles. *Other Business Assets* includes machinery, equipment, or other assets.

Description	Current Value	Loan Balance	Lender	Monthly Payment	Date of Final Payment
22a. Tools Used in Trade/Business	\$ _____	\$ _____	_____	\$ _____	_____
Other: (List Below)					
22b. Machinery	\$ _____	\$ _____	_____	\$ _____	_____
22c. Equipment	\$ _____	\$ _____	_____	\$ _____	_____
22d. _____	\$ _____	\$ _____	_____	\$ _____	_____
22e. _____	\$ _____	\$ _____	_____	\$ _____	_____

SECTION 8: ACCOUNTS/NOTES RECEIVABLE *(Use only if needed)*

23. **Accounts/Notes Receivable.** List all accounts separately, including contracts awarded but not started. (If you need additional space, attach a separate sheet.)

Description	Amount Due	Date Due	Age of Account
23a. Name _____	\$ _____	_____	___ 0-30 days
Address _____			___ 30-60 days
City/State/Zip _____			___ 60-90 days
			___ 90+ days
23b. Name _____	\$ _____	_____	___ 0-30 days
Address _____			___ 30-60 days
City/State/Zip _____			___ 60-90 days
			___ 90+ days
23b. Name _____	\$ _____	_____	___ 0-30 days
Address _____			___ 30-60 days
City/State/Zip _____			___ 60-90 days
			___ 90+ days
23d. Name _____	\$ _____	_____	___ 0-30 days
Address _____			___ 30-60 days
City/State/Zip _____			___ 60-90 days
			___ 90+ days
23e. Name _____	\$ _____	_____	___ 0-30 days
Address _____			___ 30-60 days
City/State/Zip _____			___ 60-90 days
			___ 90+ days
23f. Name _____	\$ _____	_____	___ 0-30 days
Address _____			___ 30-60 days
City/State/Zip _____			___ 60-90 days
			___ 90+ days

23g. Add "Amount Due" from lines 23a through 23f = \$ _____

SECTION 9: MONTHLY INCOME AND EXPENSE ANALYSIS

If only one spouse has a debt, but both have income, list the total household income and expenses.

<u>Total Income</u>		<u>Total Living Expenses</u>	<u>Actual Monthly</u>
<u>Source</u>	<u>Gross Monthly</u>	<u>Expense Items¹</u>	
24. Wages (yourself)	\$ _____	39. Rent/Mortgage	\$3,600
25. Wages (spouse)	\$ _____	40. Electric	\$300-400
26. Interest – Dividends	\$0	41. Natural Gas	\$0
27. Net Business Income	\$ _____	42. Cable TV	\$110-350
28. Net Rental Income	\$0	43. Telephone	\$0
29. Pension/Social Security	\$0	44. Water	\$150-300
30. Pension/Social Security (Spouse)	\$0	45. Food	\$1,500-2,000
31. Child Support	\$0	46. Car Payment	\$0
32. Alimony	\$0	47. Gasoline	\$300-500
33. Bonuses/Commissions	\$ _____	48. Car Insurance	\$320-600
34. Income from Relatives	\$0	49. Cell Phone/Pager	\$400-1,000
35. Unemployment Income	\$0	50. Other Utilities	\$0
36. Disability Payments	\$0	51. Clothing & Misc.	\$1,500
37. Other	\$ _____	52. Health Care	\$0
38. Total Income	\$ _____	53. Court Ordered Payments	\$0
		54. Child/Dependent Care	\$1,000-4,000
		55. Life Insurance	\$0
		56. Other secured debt	\$0
		57. Other expenses	\$ _____
		58. Education Expenses	\$2,600-5,000
		59. Entertainment	\$ _____
		60. Gifts	\$ _____
		61. Total Living Expenses	\$ _____



ATTACHMENTS REQUIRED: Please include:

- A copy of your last Form 1040 with all Schedules
- Proof of all current expenses that you paid for the last 3 months, including utilities, rent, insurance, property taxes, etc.
- Current copies of yours and your spouse's Driver's License
- Proof of all non-business transportation expenses (e.g., car payments, lease payments, fuel, oil, insurance, parking, registration)
- Proof of payments for health care, including health insurance premiums, co-payments, and other out-of-pocket expenses
- Copies of any court order requiring payment and proof of such payments for the past 3 months

CERTIFICATION

I declare that I have examined the information given in this statement and, to the best of my knowledge and belief, it is true, correct, and complete, and I further declare that I have no assets, owned either directly or indirectly, or income of any nature other than as shown in this statement, including any attachment.

Signature _____

October 29, 2019
Date

WARNING

False statements are punishable up to five years imprisonment, a fine of \$250,000, or both pursuant to 18 U.S.C. §1001.

¹ Expenses generally not allowed: We generally do not allow you to claim tuition for private schools, public or private college expenses, charitable donations, voluntary retirement contributions, payments on unsecured debts such as credit card bills, and other similar expenses. However, we may allow these expenses, if you can prove that they are necessary for the health and welfare of you or your family.